

Bethel Baptist Church
Refuge Student Ministries
2907 N. Walton Blvd. Bentonville, AR
www.refugeministry.net
479-426-7990



Liability and Parental Consent Form

Release of All Claims

In consideration for being accepted by Bethel Baptist Church for participation, we (I, being 21 years of age or older) do for ourselves (myself) (and for and on behalf of my child-participant if said child is not 21 years of age or older) do hereby release, forever discharge and agree to hold harmless Bethel Baptist Church, the directors thereof, from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned child-participant that occur while said child is participating in described activities or trips.

Furthermore, I (we)(and on behalf of our child-participant if under the age of 21 years) hereby assume all risk or personal injury, sickness, death, damage and expense as a result of participation in recreational and work activities involved therein.

Furthermore, authorization and permission is hereby given to said corporation to furnish any necessary transportation, food and lodging for this participant.

The undersigned further hereby agrees to hold harmless and indemnify said church, its directors, employees and agents, for any liability sustained by said church as the result of the negligent, willful or intentional acts of said participant, including expenses including thereto. (If the participant has not attained the age of 21 years)

We (I) are the parent(s) or legal guardian(s) of this participant, and hereby grant our (my) permission for him / her to participate fully in said trip, and hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorized medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any.

Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we (I) hereby assume all transportation cost.

(Only participant need sign if 21 years of age or older. If under 21 years of age, the custodial parent must sign.)

Custodial Parent Signature _____ Date _____

Participant Signature _____ Date _____

Hospital Insurance

Name of Insurance Co. _____

Policy Number _____

Doctors Name _____ Doctors Phone _____

Emergency Phone Numbers _____

REFUGE RULES

No weapons, tobacco or illegal narcotics

No talking or disturbing during the meetings

No romantic displays of affection

All trash goes in trash receptacles

Respect and obey all Youth Staff

Vehicles must be cleaned after use

All participants, regardless of age are subject to these rules

The breaking of these rules may subject the participant(s) parent(s) to be called and or being sent home at the cost of the parent(s).

At the same time we recognize what an awesome responsibility you have entrusted us by letting you child accompany us, so we will do everything possible to make sure your child remains safe, and has a good time. We appreciate every parent, and the trust they have given us by allowing their child to go on this event.

Parent(s)

I agree to all of the above rules and realize that my child (children) are responsible for obeying them all.

Signature _____ Date _____

Student

I agree to follow all of these rules

Signature _____ Date _____